



Coastal Zone Management Semi-Annual Grant Progress Report

(Use F11 to get to the next field:)

Recipient Name:	Grant No. G
Project Title:	
Ecology's Project Officer:	Date:
Reporting Period: From:	To:
Reported by:	Signature: _____

A comparison of actual accomplishments by task to the objectives established for the reporting period including a description of issues on fisheries resources;

For any work related to GIS, designate data standard utilized and associated data documentation:

Status of Project Schedule:

Status of financial and funds disbursement:

Personnel changes:

Any difficulties encountered during the quarter:

Anticipated (environmental, recreational, etc.) benefits of the project:

ECY 070-18

If you require this document in an alternative format, please contact the Shorelands and Environmental Assistance Program at 360 407-6606 or TTY at 711 or 1-800-833-6388.